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I. TITLE OF REPORT (if a fill-in report include Form No.)									S	TATIST	ICAL		
Quarterly Financial Statement (Senior Officer)									X i	IARRATI	VΕ		
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3. FUNCTIONAL	AREA		EDICAL	12	FINANCE		+	OTHER (specify) COMMUNICATIONS					
4. NO. OF COPI	FREQUENCY (week			erly, etc.)	6. D	ISTRIBUTI	ON (No.	of co		s not			
2	Quarterly						number of copies)						
			ADP PROCESSING	ING 9. DIRECTIV					IVE AUTHORITY REQUIRING REPORT				
computer print-out, etc) YES IF YES GIVE ADP PROCESSING NO.													
Memorandum			¢ 110	1									
10. PREPARING COMPONENT (include lowest level contributing information to report) II. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)													
OC-P None													
				12.	COST FA	CTORS							
			A. MANUAI			AND REVI	EW COS	STS	·				
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			14.	FUTU	RE GOALS	3					·		
GOAL PROPOSED BY	CAL PROPOSED BY COMPONENT FOR THIS REPORT									ESTIMATED SAVINGS			
RETAIN AS IS X OTHER (explain)									MAN-HOU	RS	DOI	LLARS	
CHANGE Refer to higher authority.												STAT	
IG. DATE OF INVENTORY 17 NUMBER OF DECOMON FURNISHING INFORMATION 18 EXTENSION													
Approved For Release 2006/11/13: CIA-RDP75-00399R000100090138-6													
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FORM 142				Classification								22-36-43)	

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